

**Mutual Respect is the Key:
Knowledge, Attitudes and Beliefs about Collaborative Practice in Maternity
Care in Canada**

Executive Summary of Draft Report on Interviews with Key Informants

Purpose

The Multidisciplinary Collaborative Primary Maternity Care (MCP²) project is funded through the Health Canada Primary Health Care Transition fund to reduce key barriers and facilitate the implementation of national multidisciplinary collaborative primary maternity care strategies as a means of increasing the availability and quality of maternity services for all Canadian women. The evaluation component of the project is using both quantitative and qualitative methods to understand and compare stakeholders' knowledge, attitudes and beliefs towards collaborative maternity care at the beginning and the end of the project. This report outlines the findings from the qualitative interviews conducted with professional association representatives and government policy decision makers at the beginning of the project. The semi-structured interviews were designed to probe study participants' knowledge, attitudes and beliefs about multidisciplinary collaborative maternity care in Canada.

Method

Ethical approval for this evaluation project was obtained from the University of Ottawa and Queen's University. Study participants were 3-5 representatives from each of the six organizations partnered for the MCP² project and six provincial government decision makers representing four provinces. Twenty-nine telephone interviews were conducted with 31 participants between February and April 2005. During the interviews, participants were asked open ended questions about their memberships'/ministry's perspective on multidisciplinary collaborative maternity care. The interviews were audio-taped and transcribed verbatim. Content and thematic analysis was conducted.

Findings

This report is divided into subsections that illustrate a synthesis of the broad themes and sub themes that emerged from the analysis. The subsections are woman and family centred care, mutual philosophy of care, barriers to collaboration, facilitators to collaboration, worries and attitudes towards collaborative models, benefits of collaborative models of maternity care and components of collaborative models (Figure 1).

Participants expressed cautious optimism regarding multidisciplinary collaborative maternity care in Canada. They spoke of how multidisciplinary collaborative care is part of the solution to the shortage of primary maternity care providers and beneficial for women and their families in terms of access to care and quality of care.

Participants shared the beliefs that collaborative maternity care should be woman and family centred and that it is essential for teams of providers to have mutual philosophies of care. While moving away from 'birth as pathology' was often described as a style or philosophy of care, it was also described as a potential benefit of multidisciplinary collaboration.

Most participants were knowledgeable of the MCP² project, and at least some of the components of collaborative care models, the barriers and facilitators of collaboration. While many barriers to collaborative care were described, participants expressed optimism that these barriers can be overcome.

Despite their generally positive attitudes towards collaboration, participants expressed worries. In particular, they have concerns regarding continuity of care provider, fragmentation of care, the threat to professional autonomy and to the uniqueness of individual disciplines.

Mutual respect within and between disciplines emerged as the essence of successful multidisciplinary collaborative practice. Teams that have mutual trust and respect for each other seem to be more capable of overcoming the structural and historical barriers to collaboration.

The findings from this study suggest that there is a cautious optimism among the national associations and provincial policy makers regarding the reduction of structural and historical barriers to collaborative care. However, the most significant and perhaps difficult barriers to collaboration centre on a change in culture from one of mistrust and lack of respect among the disciplines to one that reflects mutual trust and respect. Although this cultural change is beginning to happen, there is an essential need to enhance respect among disciplines before true collaboration is possible.

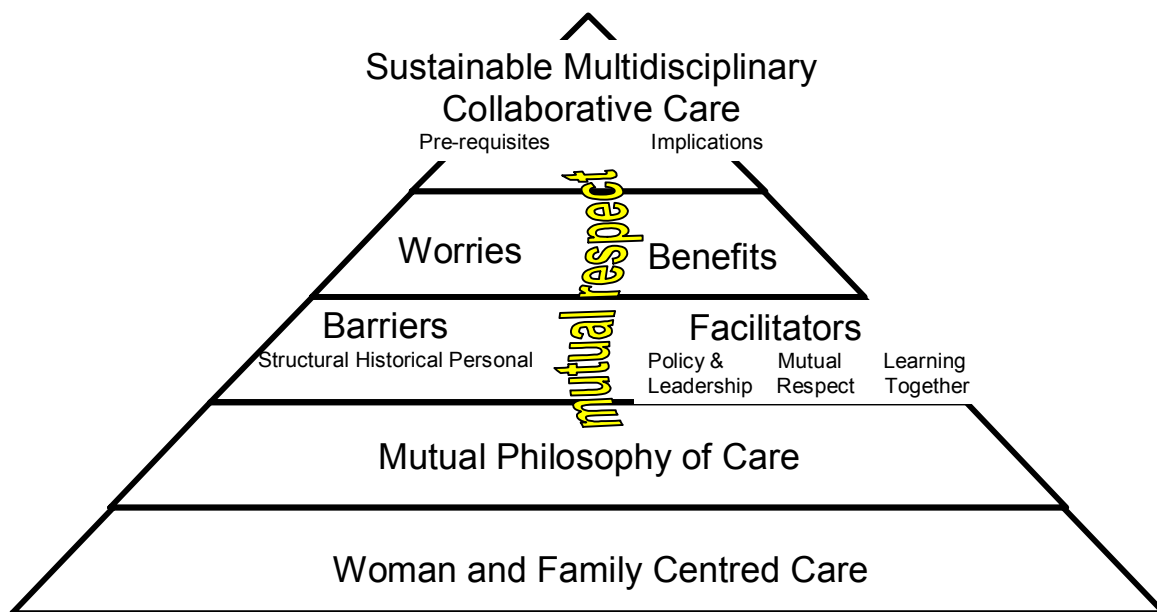


Figure 1: Synthesis of the themes and sub-themes

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